ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		2-23-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H·T	913	03/19/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	...... Rejected	N	...... Non-elected
=	...... Allowed	I	...... Interference
—	(Through numeral)... Canceled	A	...... Appeal
÷	...... Restricted	O	...... Objected

Claim (Final / Original)	Date	Claim (Final / Original)	Date	Claim (Final / Original)	Date
1 ✔		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
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11		61		111	
12		62		112	
13		63		113	
14		64		114	
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17		67		117	
18 ✔		68		118	
19		69		119	
20		70		120	
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24		74		124	
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37		87		137	
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41		91		141	
42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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